

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000071571

FILED
Mar 29, 2007
Secretary of State

Entity Name: COVER-ALL BENEFITS, INC.

Current Principal Place of Business:

6400 N ANDREWS AVE SUITE 460
FT LAUDERDALE, FL 33309 US

New Principal Place of Business:

1332 SW 12TH TERRACE
BOCA RATON, FL 33486 US

Current Mailing Address:

6400 N ANDREWS AVE SUITE 460
FT LAUDERDALE, FL 33309 US

New Mailing Address:

1332 SW 12TH TERRACE
BOCA RATON, FL 33486 US

FEI Number: 11-3642478

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAYNE, TODD S ESQ.
4000 HOLLYWOOD BLVD.
SUITE 400-NORTH
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: CLAWSON, NATALIE
Address: 6611 N. WOODBRIDGE DR.
City-St-Zip: PARKLAND, FL 33067

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CLAWSON, NATALIE
Address: 6611 N. WOODBRIDGE DR.
City-St-Zip: PARKLAND, FL 33067

Title: VP () Change (X) Addition
Name: KOPER-GARY, RAYMONDE
Address: 1332 SW 12TH TERRACE
City-St-Zip: BOCA RATON, FL 33486

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NATALIE CLAWSON

PRES

03/29/2007

Electronic Signature of Signing Officer or Director

Date